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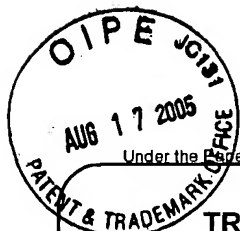
In re application of : William David Hardgrave
Serial No. : 10/632,448
Filed : 01 August 2003
For : Downhole Hydraulic Ram
Group No, : 3672
Examiner : Tsay, Frank S

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

AMENDMENT AND RESPONSE PURSUANT TO 37 C.F.R. 1.111

In response to the Office Action dated May 18, 2005, please amend the
above-identified patent application as follows:



03-18-05

IFW

PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	101632, 448	
	Filing Date	01 August 2003	
	First Named Inventor	William David Hardgrave	
	Art Unit	3672	
	Examiner Name	Tsay, Frank S	
Total Number of Pages in This Submission	30	Attorney Docket Number	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks Response to Office Action dated May 18, 2005	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	William David Hardgrave	
Signature	David Hardgrave	
Date	17 August 2005	

CERTIFICATE OF TRANSMISSION/MAILING		
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Type or printed name	William David Hardgrave	
Signature	Date	8/17/2005

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